

**UPDATED SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR) PLAN**  
**ZAMBIA**  
**KITWE CITY COUNCIL**

**Strategic objective:** To adopt and implement policies, programmes, services to enhance gender and youth sensitive, appropriate and affordable quality health care, including sexual and reproductive health and rights (SRHR).

NB. The Council's Gender Based Violence and HIV and AIDS plans were updated in line with the provisions of the Sustainable Development Goals (SDGs) and the Updated SADC Protocol on Gender and Development and are not included in the updated SRHR Plan. The SRHR plan will be implemented in concert with the GBV and HIV and AIDS plans to provide holistic SRHR care and services.

**All baseline data in the plan must be disaggregated by gender and age.**

BASELINE	TARGET	INDICATORS	ACTIONS	OUTPUT	WHO	TIME FRAME	BUDGET	LOCATION IN STRATEGIC PLAN OR IDP
<b>Menstrual health</b>								
<b>Strategic objective:</b> Put in place systems to ensure the provision of sustainable and cost-effective sanitary pads to girls and young women unable to access sanitary pads. Access to safe water and sanitation. The council raises awareness and provides training on the importance of good hygiene.								
<b>Access to menstrual products</b>								
How many girls and young women are receiving sanitary pads? <b>00</b>	<b>At least 200 marginalised women and girls</b>	Increase in the number of girls and young women receiving sanitary pads.	-Identify the targeted women and girls  -partner stakeholder identification and engagement through letters written to them	- letter written to DEBS, Friends of the Street Children and Persons with disability  -letter written to DREAMS, NEMCHEM, chamber of commerce	KCC Gender focal point person/DACA	<b>JANUARY 2019</b>	<b>K48,000</b>	<b>In progress</b>
<b>Water, sanitation and hygiene</b>								
What	<b>100%</b>	Increase in	-installation of	- letters	KCC DPH, DHSS,DES,	<b>2019-</b>	<b>K650,000.00</b>	<b>In</b>

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proportion of the council's population have access to safe water? <b>96%</b>		the proportion of the council's population that have access to safe water.	boreholes, water kiosk, communal water stands in peri-urban, and public places like markets and bus stations	<b>written to stakeholders, like water aid, NWSC,</b> -	<b>GFP, MD- NWSC</b>	<b>2020</b>		<b>progress</b>
What proportion of the council's population have access to sanitation? <b>62%</b>	<b>100%</b>	Increase in the proportion of the council's population that have access to sanitation.	-Construction of VIP Toilets, and public sanitary facilities	<b>1000 household VIP Toilets constructed</b>	MD- NWSC, DPH, DHSS, DES	<b>2019-2020</b>	<b>K1,200,000.00</b>	<b>In progress</b>
Number of council programmes that promote good hygiene.	<b>08</b> programmes	Increase in the number of council programmes that promote good hygiene.	<b>-Conduct workshops</b> <b>-TOT</b> <b>-Hold Community meetings</b>	<b>-Hold 4 capacity building workshops</b> <b>-Hold 4 TOTs workshops</b> <b>-Hold 56 Community (ward) meetings</b>	<b>KCC, DHP, DHSS, MD NWSC, DHO DOH</b>	<b>On Going</b>	<b>K14,102,587.00</b>	<b>In progress</b>

### **SRHR education and services**

**Strategic objective:** To integrate community-based orphans and vulnerable children and youth (OVC&Y) programmes with comprehensive sexuality education and other adolescent and youth reproductive health services. Implement interventions for parents, guardians and teachers to ensure their support and involvement in the provision of comprehensive sexuality education and other SRH and HIV services to children, adolescents and youth. Integrate and ensure provision of CSE, SRH and HIV services in activities and programmes targeting out-of-school adolescents and youth.

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<b>Comprehensive SRHR information, education and communication</b>								
Percentage of young people receiving comprehensive sexuality education.		Increase in the percentage of young people receiving comprehensive sexuality education						<b>In progress</b>
Number of interventions <b>00</b> for parents, guardians and teachers to ensure their support and involvement in the provision of comprehensive sexuality education and other SRH and HIV services to children, adolescents and youth.	<b>All parents and guardians for school going children</b>	Increase in the number of interventions for parents, guardians and teachers to ensure their support and involvement in the provision of comprehensive sexuality education and other SRH and HIV services to children, adolescents and youth.	<b>-Hold Parent Teacher Association (PTA) meetings -Conduct sensitization of parents/guardians on comprehensive sexuality education of their children through PTA -Conduct teacher training</b>	<b>- PTA meetings held -Sensitisation done to parents and guardians -Teacher training conducted</b>	<b>District Education Board Secretary (DEBS)</b>	<b>June 2019</b>		<b>In progress</b>
Extent to which CSE, SHR and HIV	<b>CSE rolled out in 2014 and learners from</b>	Increase in the extent to which CSE,	<b>-Distribution of CSE materials to teachers</b>	<b>-CSE materials distributed</b>	<b>DEBS</b>	<b>On-going</b>		

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services are integrated into programmes for out of school youth.	<b>grade 5-12 are receiving comprehensive sexuality education but there are no programmes for out of school children</b>	SHR and HIV services are integrated into programmes for out of school youth.						
<b>Teenage pregnancies and child marriages</b>								
<b>Strategic objective:</b> To implement community mobilisation and advocacy strategies against child marriages and teenage pregnancies. Develop community systems for the provision of economic and social support for teenage mothers.								
Advocacy strategies to prevent child marriages and teenage pregnancy.	<b>-Adolescent girls between the age 10-24 and young women -School going children</b>	Successful outcomes from the advocacy strategies to prevent child marriages and teenage pregnancy.	<b>-Conduct Voluntary Counselling &amp; Testing at safe spaces -Provide Family Planning at the centres</b>	<b>-VCT conducted at safe places -Family planning services provided</b>	<b>DEBS, YWCA, GFP,DACA,CHEP</b>	<b>On-going</b>		
Systems in place for the provision of economic and social support for teenage mothers.	<b>At least 50 Teenage mothers</b>	Increase in the number of systems in place for the provision of economic and social support for teenage mothers.	<b>-Identification of teenage mothers - Do Referrals for teenage mothers</b>	<b>-Teenage mothers identified -Referrals done</b>				
<b>SRHR</b>								

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<b>Strategic objective:</b> To ensure that the community knows about and uses SRHR services. Establish and provide SRH and HIV integrated community-based youth- and adolescent-friendly services. Provide STI information, screening and treatment services. Provide information and counselling services on drug and substance abuse.								
How many people receive SRHR services through the council?	<b>244 youths at workplace</b>	Increase in the population accessing integrated SRH services	<ul style="list-style-type: none"> <li>-Conduct capacity building workshop</li> <li>- conduct a baseline survey with the KCC youths on the levels of understanding of comprehensive sexuality education</li> </ul>	<ul style="list-style-type: none"> <li>-Workshop conducted and 244 youths reached with information on Comprehensive Sexuality education</li> <li>-Baseline survey conducted</li> </ul>	DACA, GFP, DHSS,DPH,DHRA,PPAZ	May 2019		
Number of clinics, mobile clinics or other facilities providing comprehensive SRHR in the municipality.	<b>01</b>	Increase in the number of clinics, mobile clinics and other facilities offering SRHR and an increase in the scope of SRHR services provided.	-Provision of VCT, family planning, Health education	-VCT, Family planning services provided	DPH	On-going		
How many people access treatment for STIs?		Increase in the number of people receiving STIs.						

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How many people receive information and counselling on drug and substance abuse?		Increase in the number of people offering drug and substance abuse.						
<b>Maternal health</b>								
<b>Maternal mortality</b>								
<b>Strategic objective: To</b> take measures to reduce maternal mortality. Provision of contraceptives and age-appropriate family planning information, counselling and contraceptive services or referrals to adolescent-friendly service providers. Provide quality antenatal and obstetric care for including pregnant adolescents and young girls. Provide targeted post-natal care services for eligible adolescents and youth. Provide information and education on cervical and breast cancer. Provide information and services for safe legal abortion and post-abortion care.								
What is the Maternal mortality ratio?	<b>125/100,000</b>	Decrease in Maternal mortality ratio.	<b>-Conduct sensitization</b>	<b>-Sensitization done</b>	<b>Kitwe District Health Office (KDHO)</b>	<b>On-going</b>		
<b>Family planning and contraception</b>								
What is the contraceptive prevalence rate?	<b>45%</b>	Increase in the contraceptive prevalence rate	<b>-Conduct sensitization and provision of contraceptive services</b>	<b>Sensitization done and services provided</b>	<b>KDHO</b>			
What is the met demand for family planning?	<b>58% of women in child bearing</b>	Increase in the met demand for family planning	<b>-Conduct sensitization and provision of family planning services</b>	<b>-Sensitization done and family planning services provided</b>	<b>KDHO</b>	<b>On-going</b>		
<b>Antenatal care</b>								

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What is the percentage of births attended by skilled health personnel?	<b>69%</b>	Increase in the percentage of births attended by skilled health personnel.	<b>-Provision of health care -Conduct skill training for health personnel</b>	<b>-Health care provided -Training conducted for health personnel</b>	<b>KDHO</b>	<b>On-going</b>		
<b><i>Postnatal care</i></b>								
How many women and girls receive postnatal care?	<b>7,261</b>	Increase in the number of women and girls who receive postnatal care.	<b>-Provision of health care facilities -Conduct Sensitization meetings for women and girls</b>	<b>-Health care facilities provided -Sensitisation meetings conducted</b>	<b>KDHO</b>	<b>On-going</b>		
<b><i>Cervical and breast cancer</i></b>								
How many women and girls receive the HPPV vaccine?	<b>N/A</b>	Increase in the number of women and girls who receive the HPV vaccine.	-	-	-	-	-	-
How many women and girls receive information on cervical and breast cancer?	<b>-Cervical-960 -Breast-7,239</b>	Increase in the number of women and girls who receive information on cervical and breast cancer.	<b>-Conduct Sensitisation meetings on breast and cervical cancer -Provision of health care services</b>	<b>-Sensitization meetings conducted -Health care services provided</b>	<b>KDHO</b>	<b>On-going</b>		
<b><i>Safe abortion services</i></b>								

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Number of people receiving information and services for safe legal abortion and post-abortion care.	<b>-Safe legal abortion-1,154 -Post abortion care-1,033</b>	Increase in numbers of people receiving information and services for safe legal abortion and post-abortion care.	<b>-Conduct sensitization meetings -Provision of health care services</b>	<b>-Sensitization meetings conducted -Health care services provided</b>	<b>KDHO</b>	<b>On-going</b>		
<b>Key populations</b>								
<b>Strategic objective:</b> To ensure that the council has programmes to address the SRHR needs of lesbian, gay, bisexual, transsexual, intersex and queer (LGBTIQ) communities. Council has programmes to address the SRHR needs of sex workers.								
Number of SRHR programmes that specifically target LGBTIQ communities.		Increase in the number of SRHR programmes for LGBTIQ communities and people accessing these programmes.						
Number of SRHR programmes that specifically target sex workers.		Increase in the number of SRHR programmes for sex workers and people accessing these						

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		programmes.						